



Policy: 1050
Chapter: Quality Assurance
Rule: Quality Assurance Activities
and Reports

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| A.R.S. | A.C.A | A.A.C |
| §§41-2804, | 3-JTS-1A-23 (Ref. 2-9020) | |

The Arizona Department of Juvenile Corrections (ADJC) recognizes the need for a uniform Quality Assurance Program. ADJC is a self correcting agency, continuously striving for improvement through the Quality Assurance process. ADJC shall establish a process and methodology by which data based decisions are made. The Department shall consistently measure process outcomes and examine current practices through Quality Assurance activities. ADJC will utilize Quality Assurance data to establish appropriate programs and improve practice within the agency.

Although the Quality Assurance Unit within ADJC consists of a Quality Assurance Administrator, a Quality Assurance Coordinator, Institutional Coordinators, and a team of Inspectors, Quality Assurance is everyone's role. This diverse team shall possess a variety of backgrounds and skills which will enable it to examine agency activities from both the safety and therapeutic perspective.

Michael D. Branham, Director

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Definitions:

1. **Quality Assurance Activities** can be evaluations and monitoring activities, unannounced site visits, various types of inspections, or any other activity deemed appropriate.
2. **Quality Assurance Inspections (Monitoring and Evaluation activities)** are the tasks for collecting, analyzing, interpreting, and documenting information during an evaluation or monitoring. These activities could include, but are not limited to: direct observation, inspections, review of management reports, specific case review, and fidelity checks for specific programming.

Inspections and evaluations include:

- A. **Incident Driven-** An inspection that results because of an incident (for example, contraband found in one area may result in an incident driven inspection in another area to determine if a problem exists)
 - B. **Self Generated-** An inspection that was not planned but was a result of something discovered while at the facility or other ADJC location. The majority of self generated inspections are minor issues and are corrected on the spot with facility management.
 - C. **Requested Inspections-**Inspections that are a result of direct requests from ADJC employees. These could be requested by facility management, members of leadership team and others as deemed appropriate. Leadership will be advised of requests by facility management.
 - D. **Safety Inspections-**Inspections designed to address specific safety issues. This could be related to fire safety, physical plant, and other policy or state/federal regulated areas. These could be quarterly, monthly, unannounced, or incident driven. Safety inspections may require specialized training or certifications for inspectors.
 - E. **Random-**Unannounced visits conducted at various locations, dates, and times. These inspections could examine any issue.
 - F. **Follow up inspections-**Inspections scheduled to follow up on action plans, specific issues, etc.
 - G. **Formal Audits-**Regularly scheduled inspections examining specific areas
 - H. **Evaluation Activities-**Activities conducted to evaluate programming, treatment, and other rehabilitative services within ADJC. These inspections could be requested by the Leadership, scheduled with personnel in the respective area, or conducted entirely at random. Evaluation activities require a level expertise that may take more training or subject matter knowledge.
3. **Division QA Policies** are the policies/procedures developed by divisions within ADJC which support the ADJC Quality Assurance Program. These policies serve as the day to day monitoring of specific procedures within each division.
4. **Facility-based Quality Assurance Teams** are the secure facility quality assurance work groups, led by the Institutional Coordinators, with cross-facility representation designed to participate in QA activities. This team will work with the facility management team to address QA issues agreed upon by the QA administrator and facility Superintendent or members of Leadership Team.
5. **Institutional Coordinators (IC)** are QA Division personnel responsible for the coordination of all QA activities at their assigned facility.
6. **Continuous Improvement** is an ongoing effort that includes the inspection and evaluation activities designed to improve agency operations.
7. **Best Practice Standards that include but are not limited to North Central Accreditation (NCA), National Commission on Correctional Health Care (NCCHC) and American Correctional Association (ACA) Standards** for Youth Correction and Detention Facilities shall be utilized as guidelines for self improvement and accountability to improve the quality of life for juveniles in custody.
8. **Continuous Improvement Process** is a six step model used by ADJC. It follows the best practices of the Deming Cycle of Plan, Do, Check/Study, Act (PDCA).
- A. **Step 1 Identify the issue, purpose, and scope to be reviewed**
 - i. Identify and focus on core issues;
 - ii. Identify and clarify what is to be reviewed.
 - B. **Step 2 Review current practices, situations, and policies**
 - i. Understand the present process and policies;

- ii. Determine expectations for continuous improvement.

C. Step 3 Audit and Analysis

- i. Audit - collect data;
- ii. Analyze data;
- iii. Identify the major potential issues.

D. Step 4 Findings and Recommendations

- i. Present findings;
- ii. Keep recommendations and solutions simple.

E. Step 5 Action Plan Implementation and Follow-up

- i. Evaluate the solutions;
- ii. Identify barriers to implementing solutions;
- iii. Implement
- iv. Follow up inspection with data collection to compare before and after improvements;
- v. Compare results with what is expected.

F. Step 6 Standardization

- i. Standardize the new process;
- ii. Document the changes made through policy and practice.